

United States Bankruptcy Court NORTHERN DISTRICT OF ILLINOIS EASTERN DIVISION (CHICAGO)		Voluntary Petition										
Name of Debtor (if individual, enter Last, First, Middle): <b>Corcoran, Mary B</b>	Name of Joint Debtor (Spouse) (Last, First, Middle):											
All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): <b>aka Mary Corcoran-Hakala</b>	All Other Names used by the Joint Debtor in the last 8 years (include married, maiden, and trade names):											
Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all): <b>xxx-xx-8220</b>	Last four digits of Soc. Sec. or Individual-Taxpayer I.D. (ITIN)/Complete EIN (if more than one, state all):											
Street Address of Debtor (No. and Street, City, and State): <b>725 English Lane Winthrop Harbor, IL</b>	Street Address of Joint Debtor (No. and Street, City, and State):											
ZIP CODE <b>60096</b>	ZIP CODE											
County of Residence or of the Principal Place of Business: <b>LAKE</b>	County of Residence or of the Principal Place of Business:											
Mailing Address of Debtor (if different from street address):	Mailing Address of Joint Debtor (if different from street address):											
ZIP CODE	ZIP CODE											
Location of Principal Assets of Business Debtor (if different from street address above):												
ZIP CODE												
<b>Type of Debtor</b> (Form of Organization) (Check one box.)	<b>Nature of Business</b> (Check one box.)	<b>Chapter of Bankruptcy Code Under Which the Petition is Filed</b> (Check one box.)										
<input checked="" type="checkbox"/> Individual (includes Joint Debtors) <i>See Exhibit D on page 2 of this form.</i> <input type="checkbox"/> Corporation (includes LLC and LLP) <input type="checkbox"/> Partnership <input type="checkbox"/> Other (If debtor is not one of the above entities, check this box and state type of entity below.)	<input type="checkbox"/> Health Care Business <input type="checkbox"/> Single Asset Real Estate as defined in 11 U.S.C. § 101(51B) <input type="checkbox"/> Railroad <input type="checkbox"/> Stockbroker <input type="checkbox"/> Commodity Broker <input type="checkbox"/> Clearing Bank <input type="checkbox"/> Other	<input checked="" type="checkbox"/> Chapter 7 <input type="checkbox"/> Chapter 9 <input type="checkbox"/> Chapter 11 <input type="checkbox"/> Chapter 12 <input type="checkbox"/> Chapter 13 <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Main Proceeding <input type="checkbox"/> Chapter 15 Petition for Recognition of a Foreign Nonmain Proceeding										
<b>Chapter 15 Debtors</b> Country of debtor's center of main interests:	<b>Tax-Exempt Entity</b> (Check box, if applicable.)	<b>Nature of Debts</b> (Check one box.)										
Each country in which a foreign proceeding by, regarding, or against debtor is pending:	<input type="checkbox"/> Debtor is a tax-exempt organization under title 26 of the United States Code (the Internal Revenue Code).	<input checked="" type="checkbox"/> Debts are primarily consumer debts, defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose." <input type="checkbox"/> Debts are primarily business debts.										
<b>Filing Fee</b> (Check one box.)	<b>Check one box:</b>	<b>Chapter 11 Debtors</b>										
<input checked="" type="checkbox"/> Full Filing Fee attached.  <input type="checkbox"/> Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A.  <input type="checkbox"/> Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B.	<input type="checkbox"/> Debtor is a small business debtor as defined by 11 U.S.C. § 101(51D). <input type="checkbox"/> Debtor is not a small business debtor as defined in 11 U.S.C. § 101(51D).	<b>Check if:</b> <input type="checkbox"/> Debtor's aggregate noncontingent liquidated debts (excluding debts owed to insiders or affiliates) are less than \$2,490,925 (amount subject to adjustment on 4/01/16 and every three years thereafter).										
<b>Statistical/Administrative Information</b>												
<input type="checkbox"/> Debtor estimates that funds will be available for distribution to unsecured creditors. <input checked="" type="checkbox"/> Debtor estimates that, after any exempt property is excluded and administrative expenses paid, there will be no funds available for distribution to unsecured creditors.		THIS SPACE IS FOR COURT USE ONLY										
Estimated Number of Creditors <table border="0"> <tr> <td><input checked="" type="checkbox"/> 1-49</td> <td><input type="checkbox"/> 50-99</td> <td><input type="checkbox"/> 100-199</td> <td><input type="checkbox"/> 200-999</td> <td><input type="checkbox"/> 1,000-5,000</td> <td><input type="checkbox"/> 5,001-10,000</td> <td><input type="checkbox"/> 10,001-25,000</td> <td><input type="checkbox"/> 25,001-50,000</td> <td><input type="checkbox"/> 50,001-100,000</td> <td><input type="checkbox"/> Over 100,000</td> </tr> </table>			<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> Over 100,000
<input checked="" type="checkbox"/> 1-49	<input type="checkbox"/> 50-99	<input type="checkbox"/> 100-199	<input type="checkbox"/> 200-999	<input type="checkbox"/> 1,000-5,000	<input type="checkbox"/> 5,001-10,000	<input type="checkbox"/> 10,001-25,000	<input type="checkbox"/> 25,001-50,000	<input type="checkbox"/> 50,001-100,000	<input type="checkbox"/> Over 100,000			
Estimated Assets <table border="0"> <tr> <td><input type="checkbox"/> \$0 to \$50,001 to \$100,001 to \$500,000</td> <td><input checked="" type="checkbox"/> \$100,001 to \$500,000</td> <td><input type="checkbox"/> \$500,001 to \$1 million</td> <td><input type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td><input type="checkbox"/> More than \$1 billion</td> </tr> </table>			<input type="checkbox"/> \$0 to \$50,001 to \$100,001 to \$500,000	<input checked="" type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion	
<input type="checkbox"/> \$0 to \$50,001 to \$100,001 to \$500,000	<input checked="" type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion				
Estimated Liabilities <table border="0"> <tr> <td><input type="checkbox"/> \$0 to \$50,001 to \$100,001 to \$500,000</td> <td><input checked="" type="checkbox"/> \$100,001 to \$500,000</td> <td><input type="checkbox"/> \$500,001 to \$1 million</td> <td><input type="checkbox"/> \$1,000,001 to \$10 million</td> <td><input type="checkbox"/> \$10,000,001 to \$50 million</td> <td><input type="checkbox"/> \$50,000,001 to \$100 million</td> <td><input type="checkbox"/> \$100,000,001 to \$500 million</td> <td><input type="checkbox"/> \$500,000,001 to \$1 billion</td> <td><input type="checkbox"/> More than \$1 billion</td> </tr> </table>			<input type="checkbox"/> \$0 to \$50,001 to \$100,001 to \$500,000	<input checked="" type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion	
<input type="checkbox"/> \$0 to \$50,001 to \$100,001 to \$500,000	<input checked="" type="checkbox"/> \$100,001 to \$500,000	<input type="checkbox"/> \$500,001 to \$1 million	<input type="checkbox"/> \$1,000,001 to \$10 million	<input type="checkbox"/> \$10,000,001 to \$50 million	<input type="checkbox"/> \$50,000,001 to \$100 million	<input type="checkbox"/> \$100,000,001 to \$500 million	<input type="checkbox"/> \$500,000,001 to \$1 billion	<input type="checkbox"/> More than \$1 billion				

**Voluntary Petition***(This page must be completed and filed in every case.)*Name of Debtor(s): **Mary B Corcoran****All Prior Bankruptcy Cases Filed Within Last 8 Years** (If more than two, attach additional sheet.)

Location Where Filed:	Case Number:	Date Filed:
Location Where Filed:	Case Number:	Date Filed:

**Pending Bankruptcy Case Filed by any Spouse, Partner or Affiliate of this Debtor** (If more than one, attach additional sheet.)

Name of Debtor:	Case Number:	Date Filed:
District:	Relationship:	Judge:

**Exhibit A**

(To be completed if debtor is required to file periodic reports (e.g., forms 10K and 10Q) with the Securities and Exchange Commission pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 and is requesting relief under chapter 11.)

- Exhibit A is attached and made a part of this petition.

**Exhibit B**

(To be completed if debtor is an individual whose debts are primarily consumer debts.)

I, the attorney for the petitioner named in the foregoing petition, declare that I have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each such chapter. I further certify that I have delivered to the debtor the notice required by 11 U.S.C. § 342(b).

**X** /s/ HAROLD M. SAALFELD  
**HAROLD M. SAALFELD**

1/12/2015

Date

**Exhibit C**

Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety?

- Yes, and Exhibit C is attached and made a part of this petition.  
 No.

**Exhibit D**

(To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.)

- Exhibit D, completed and signed by the debtor, is attached and made a part of this petition.

If this is a joint petition:

- Exhibit D, also completed and signed by the joint debtor, is attached and made a part of this petition.

**Information Regarding the Debtor - Venue**  
(Check any applicable box.)

- Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District.
- There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District.
- Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District.

**Certification by a Debtor Who Resides as a Tenant of Residential Property**

(Check all applicable boxes.)

- Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.)

(Name of landlord that obtained judgment)

(Address of landlord)

- Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and
- Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition.
- Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

**Voluntary Petition***(This page must be completed and filed in every case)*Name of Debtor(s): **Mary B Corcoran****Signatures****Signature(s) of Debtor(s) (Individual/Joint)**

I declare under penalty of perjury that the information provided in this petition is true and correct.

[If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12 or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7.

[If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. § 342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X** /s/ Mary B Corcoran  
Mary B Corcoran

**X**

Telephone Number (If not represented by attorney)

1/12/2015

Date

**Signature of Attorney\***

**X** /s/ HAROLD M. SAALFELD  
HAROLD M. SAALFELD

Bar No. **6231257**

HAROLD M. SAALFELD, ATTORNEY AT LAW  
25 NORTH COUNTY STREET  
SUITE 2R  
WAUKEGAN, IL 60085-4342

Phone No. **(847) 249-7538**Fax No. **(847) 249-3301**

1/12/2015

Date

\*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

**Signature of Debtor (Corporation/Partnership)**

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

**X**

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

**Signature of a Foreign Representative**

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

I request relief in accordance with chapter 15 of title 11, United States Code. Certified copies of the documents required by 11 U.S.C. § 1515 are attached.

Pursuant to 11 U.S.C. § 1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

**X**

(Signature of Foreign Representative)

(Printed Name of Foreign Representative)

Date

**Signature of Non-Attorney Bankruptcy Petition Preparer**

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankruptcy petition preparer is not an individual, state the Social-Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.) (Required by 11 U.S.C. § 110.)

Address

**X**

Date

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social-Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual.

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. § 110; 18 U.S.C. § 156.

In re: Mary B Corcoran

Case No. \_\_\_\_\_  
(if known)

Debtor(s)

## EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

**Warning:** You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

*Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.*

1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency.*
2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. *[Summarize exigent circumstances here.]*

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

In re: **Mary B Corcoran**

Case No. \_\_\_\_\_  
(if known)

Debtor(s)

**EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH  
CREDIT COUNSELING REQUIREMENT**

*Continuation Sheet No. 1*

4. I am not required to receive a credit counseling briefing because of: *[Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]*
- Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.);
- Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.);
- Active military duty in a military combat zone.
5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district.

**I certify under penalty of perjury that the information provided above is true and correct.**

Signature of Debtor: /s/ Mary B Corcoran  
Mary B Corcoran

Date: 1/12/2015

In re **Mary B Corcoran**Case No. \_\_\_\_\_  
(if known)**SCHEDULE A - REAL PROPERTY**

Description and Location of Property	Nature of Debtor's Interest in Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting Any Secured Claim or Exemption	Amount Of Secured Claim
Single family home	Fee Simple	W	\$175,000.00	\$164,620.00

**Total:** **\$175,000.00**

(Report also on Summary of Schedules)

In re **Mary B Corcoran**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY**

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
1. Cash on hand.		Cash on hand	-	\$20.00
2. Checking, savings or other financial accounts, certificates of deposit or shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives.	X	Northshore Trust xxxxxxxxx account is inactive	-	\$0.99
3. Security deposits with public utilities, telephone companies, landlords, and others.	X		-	
4. Household goods and furnishings, including audio, video and computer equipment.		1/2 interest with non-filing spouse in Kitchen set - table and chairs Bedroom set - king size, dresser mirror, pine headboard, foot board Living room set - couch, love seat, chair, end tables, coffee table, Furniture all over 10 - 12 years old	-	\$500.00
5. Books; pictures and other art objects; antiques; stamp, coin, record, tape, compact disc, and other collections or collectibles.	X		-	
6. Wearing apparel.		Wearing apparel	-	\$300.00
7. Furs and jewelry.	X		-	
8. Firearms and sports, photographic, and other hobby equipment.	X		-	

In re **Mary B Corcoran**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 1*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
9. Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each.	X			
10. Annuities. Itemize and name each issuer.	X			
11. Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).)	X			
12. Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars.		Deceased husband's railroad retirement pension. Debtor not presently receiving benefits.	-	Unknown
13. Stock and interests in incorporated and unincorporated businesses. Itemize.	X			
14. Interests in partnerships or joint ventures. Itemize.	X			
15. Government and corporate bonds and other negotiable and non-negotiable instruments.	X			
16. Accounts receivable.	X			
17. Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars.	X			

In re **Mary B Corcoran**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 2*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
18. Other liquidated debts owed to debtor including tax refunds. Give particulars.	X			
19. Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property.	X			
20. Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust.	X			
21. Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each.	X			
22. Patents, copyrights, and other intellectual property. Give particulars.	X			
23. Licenses, franchises, and other general intangibles. Give particulars.	X			
24. Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes.	X			

In re **Mary B Corcoran**Case No. \_\_\_\_\_  
(if known)**SCHEDULE B - PERSONAL PROPERTY***Continuation Sheet No. 3*

Type of Property	None	Description and Location of Property	Husband, Wife, Joint, or Community	Current Value of Debtor's Interest in Property, Without Deducting any Secured Claim or Exemption
25. Automobiles, trucks, trailers, and other vehicles and accessories.		2002 Cadillac Avalanche Liquidation value \$5600 per kbb.com	-	\$5,600.00
26. Boats, motors, and accessories.	X			
27. Aircraft and accessories.	X			
28. Office equipment, furnishings, and supplies.	X			
29. Machinery, fixtures, equipment, and supplies used in business.	X			
30. Inventory.	X			
31. Animals.	X			
32. Crops - growing or harvested. Give particulars.	X			
33. Farming equipment and implements.	X			
34. Farm supplies, chemicals, and feed.	X			
35. Other personal property of any kind not already listed. Itemize.	X			
(Include amounts from any continuation sheets attached. Report total also on Summary of Schedules.)				
<u>3</u> continuation sheets attached				Total > <b>\$6,420.99</b>

In re **Mary B Corcoran**

Case No. \_\_\_\_\_

(If known)

**SCHEDULE C - PROPERTY CLAIMED AS EXEMPT**

Debtor claims the exemptions to which debtor is entitled under:  
(Check one box)

Check if debtor claims a homestead exemption that exceeds  
\$155,675.\*

- 11 U.S.C. § 522(b)(2)  
 11 U.S.C. § 522(b)(3)

Description of Property	Specify Law Providing Each Exemption	Value of Claimed Exemption	Current Value of Property Without Deducting Exemption
Cash on hand	735 ILCS 5/12-1001(b)	\$20.00	\$20.00
Northshore Trust xxxxxxxxxx account is inactive	735 ILCS 5/12-1001(b)	\$0.99	\$0.99
1/2 interest with non-filing spouse in Kitchen set - table and chairs Bedroom set - king size, dresser mirror, pine headboard, foot board Living room set - couch, love seat, chair, end tables, coffee table, Furniture all over 10 - 12 years old	735 ILCS 5/12-1001(b)	\$500.00	\$500.00
Wearing apparel	735 ILCS 5/12-1001(a), (e)	\$300.00	\$300.00
Deceased husband's railroad retirement pension. Debtor not presently receiving benefits.	735 ILCS 5/12-1006	Unknown	Unknown
2002 Cadillac Avalanche Liquidation value \$5600 per kbb.com	735 ILCS 5/12-1001(c) 735 ILCS 5/12-1001(b)	\$2,400.00 \$3,200.00	\$5,600.00
<i>* Amount subject to adjustment on 4/01/16 and every three years thereafter with respect to cases commenced on or after the date of adjustment.</i>		<b>\$6,420.99</b>	<b>\$6,420.99</b>

**SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS**

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE AND AN ACCOUNT NUMBER (See Instructions Above.)	CODEBTOR	HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL	UNSECURED PORTION, IF ANY
ACCT #: xxxxxxxx7618		-	DATE INCURRED: 02/2003 NATURE OF LIEN: <b>Conventional Real Estate Mortgage</b> COLLATERAL: <b>Single Family Home</b> REMARKS:				\$164,620.00	
North Shore Trust & Sa 700 S Lewis Ave Waukegan, IL 60085			VALUE: \$175,000.00					
Representing: North Shore Trust & Sa			Thaddeus Bond, Esq. 200 North Martin Luther King Jr Driveq. Waukegan, IL 60085				Notice Only	Notice Only
Subtotal (Total of this Page) > Total (Use only on last page) >							\$164,620.00	\$0.00
							\$164,620.00	\$0.00

No continuation sheets attached

(Report also on  
Summary of  
Schedules.)(If applicable,  
report also on  
Statistical  
Summary of  
Certain Liabilities  
and Related  
Data.)

In re **Mary B Corcoran**

Case No. \_\_\_\_\_

(If Known)

**SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS** Check this box if debtor has no creditors holding unsecured priority claims to report on this Schedule E.**TYPES OF PRIORITY CLAIMS**

(Check the appropriate box(es) below if claims in that category are listed on the attached sheets.)

 **Domestic Support Obligations**

Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relative of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1).

 **Extensions of credit in an involuntary case**

Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of a trustee or the order for relief. 11 U.S.C. § 507(a)(3).

 **Wages, salaries, and commissions**

Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sales representatives up to \$12,475\* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4).

 **Contributions to employee benefit plans**

Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5).

 **Certain farmers and fishermen**

Claims of certain farmers and fishermen, up to \$6,150\* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6).

 **Deposits by individuals**

Claims of individuals up to \$2,775\* for deposits for the purchase, lease or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7).

 **Taxes and Certain Other Debts Owed to Governmental Units**

Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8).

 **Commitments to Maintain the Capital of an Insured Depository Institution**

Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507(a)(9).

 **Claims for Death or Personal Injury While Debtor Was Intoxicated**

Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug, or another substance. 11 U.S.C. § 507(a)(10).

 **Administrative allowances under 11 U.S.C. Sec. 330**

Claims based on services rendered by the trustee, examiner, professional person, or attorney and by any paraprofessional person employed by such person as approved by the court and/or in accordance with 11 U.S.C. §§ 326, 328, 329 and 330.

\* Amounts are subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR  HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM.  IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCT #: xxxxxxxxxxxx4173  American Express PO Box 3001 16 General Warren Blvd Malvern, PA 19355	-	DATE INCURRED: 12/2003 CONSIDERATION: <b>Credit Card</b> REMARKS:			\$16,160.00
ACCT #:  Aurora Health Care 3115 Lewis Avenue Zion, IL 60099	C	DATE INCURRED: CONSIDERATION: <b>MEDICAL/DENTAL</b> REMARKS: <b>Treating physician Dennis McCreary</b>			\$85.00
ACCT #: xxxxxxxxxxxx8394  Bank Of America Attention: Recovery Department 4161 Piedmont Pkwy. Greensboro, NC 27410	-	DATE INCURRED: 08/1994 CONSIDERATION: <b>Credit Card</b> REMARKS:			\$2,966.00
ACCT #: x5436  Certified Services Inc 1733 Washington St Ste 2 Waukegan, IL 60085	-	DATE INCURRED: 04/2014 CONSIDERATION: <b>Collection Attorney</b> REMARKS:			\$185.00
ACCT #: xxx9289  Certified Services Inc 1733 Washington St Ste 2 Waukegan, IL 60085	-	DATE INCURRED: 11/2013 CONSIDERATION: <b>Collection Attorney</b> REMARKS:			\$51.00
ACCT #: xxxx9513  Choice Recovery 1550 Old Henderson Rd St Columbus, OH 43220	-	DATE INCURRED: 09/2013 CONSIDERATION: <b>Collection Attorney</b> REMARKS:			\$396.00
Subtotal >			\$19,843.00		
Total > (Use only on last page of the completed Schedule F.) (Report also on Summary of Schedules and, if applicable, on the Statistical Summary of Certain Liabilities and Related Data.)					

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR  HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM.  IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	AMOUNT OF CLAIM		
			CONTINGENT	UNLIQUIDATED	DISPUTED
ACCT #: xxxxxxxxxxxx3070  Comenity Bank/fashbug	-	DATE INCURRED: 12/15/2006 CONSIDERATION: <b>Charge Account</b> REMARKS:			\$1,725.00
ACCT #: xxxxxxxxxxxx3347  Comenity Bank/lnbryant 4590 E Broad St Columbus, OH 43213	-	DATE INCURRED: 11/2006 CONSIDERATION: <b>Charge Account</b> REMARKS:			\$1,289.00
ACCT #: xxxxx8862  Comenity Bank/Maurices Attention: Bankruptcy PO Box 182686 Columbus, OH 43218	-	DATE INCURRED: 05/2013 CONSIDERATION: <b>Charge Account</b> REMARKS:			\$357.00
ACCT #: xxxx4735  Comenity/Avenue Attn:Bankruptcy PO Box 182125 Columbus, OH 43218	-	DATE INCURRED: 02/2005 CONSIDERATION: <b>Charge Account</b> REMARKS:			\$539.00
ACCT #: xxxx6052  Credit Cntrl 5757 Phantom Dr. Hazelwood, MO 63042	-	DATE INCURRED: CONSIDERATION: <b>Unknown Loan Type</b> REMARKS:			\$2,879.00
ACCT #: xxxx5956  Credit Cntrl 5757 Phantom Dr. Hazelwood, MO 63042	-	DATE INCURRED: CONSIDERATION: <b>Unknown Loan Type</b> REMARKS:			\$844.00

Sheet no. 1 of 3 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal &gt; \$7,633.00

Total &gt;

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR  HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: xxxxxxxxx6020  <b>Dsnb Macys 9111 Duke Blvd Mason, OH 45040</b>	-	DATE INCURRED: <b>01/2002</b> CONSIDERATION: <b>Charge Account</b> REMARKS:				\$1,158.00
ACCT #: xxxx7213  <b>Harris Harris &amp; Harris, Ltd. 111 W Jackson Blvd 400 Chicago, IL 60604</b>	-	DATE INCURRED: <b>12/2012</b> CONSIDERATION: <b>Collection Attorney</b> REMARKS:				\$2,079.00
ACCT #:  <b>Illinois Housing Authority 401 N Michigan Av, Ste 700 Chicago, IL 60611</b>	C	DATE INCURRED: CONSIDERATION: <b>BALANCE ON ACCOUNT</b> REMARKS:				\$2,000.00
ACCT #: xx7719  <b>Keynote Consulting 220 West Campus Drive Suite 102 Arlington Heights, IL 60004</b>	-	DATE INCURRED: CONSIDERATION: <b>Unknown Loan Type</b> REMARKS:				\$290.00
ACCT #: xx3740  <b>Keynote Consulting 220 West Campus Drive Suite 102 Arlington Heights, IL 60004</b>	-	DATE INCURRED: <b>02/2014</b> CONSIDERATION: <b>Collection Attorney</b> REMARKS:				\$60.00
ACCT #: xxxxxxxxxxxxx8943  <b>Kohls/capone N56 W 17000 Ridgewood Dr Menomonee Falls, WI 53051</b>	-	DATE INCURRED: <b>03/1996</b> CONSIDERATION: <b>Charge Account</b> REMARKS:				\$3,663.00

Sheet no. 2 of 3 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority ClaimsSubtotal > \$9,250.00

Total &gt;

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

**SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS**

CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.)	CODEBTOR  HUSBAND, WIFE, JOINT, OR COMMUNITY	DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE.	CONTINGENT	UNLIQUIDATED	DISPUTED	AMOUNT OF CLAIM
ACCT #: <b>Larsen Florist 1342 Glen Flora Waukegan, IL 60085</b>	C	DATE INCURRED: CONSIDERATION: <b>balance on account</b> REMARKS:				\$175.00
ACCT #: <b>xxxxxx5721</b>  <b>Midland Funding 8875 Aero Dr Ste 200 San Diego, CA 92123</b>	-	DATE INCURRED: <b>03/2014</b> CONSIDERATION: <b>Factoring Company Account</b> REMARKS:				\$9,382.00
ACCT #: <b>Visa Medical Center East 99 Greenwood Av Waukegan, IL 60087-5136</b>	C	DATE INCURRED: CONSIDERATION: <b>MEDICAL/DENTAL</b> REMARKS:				\$6,000.00
ACCT #: <b>xxxxxxxxxxxx6804</b>  <b>Wf Fin Bank Attention: Bankruptcy PO Box 10438 Des Moines, IA 50306</b>	-	DATE INCURRED: <b>03/2007</b> CONSIDERATION: <b>Credit Card</b> REMARKS:				\$10,684.00

Sheet no. 3 of 3 continuation sheets attached to  
Schedule of Creditors Holding Unsecured Nonpriority Claims

Subtotal &gt; \$26,241.00

Total &gt;

(Use only on last page of the completed Schedule F.)  
(Report also on Summary of Schedules and, if applicable, on the  
Statistical Summary of Certain Liabilities and Related Data.)

\$62,967.00

**SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES**

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser," "Agent," etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no executory contracts or unexpired leases.

NAME AND MAILING ADDRESS, INCLUDING ZIP CODE, OF OTHER PARTIES TO LEASE OR CONTRACT.	DESCRIPTION OF CONTRACT OR LEASE AND NATURE OF DEBTOR'S INTEREST. STATE WHETHER LEASE IS FOR NONRESIDENTIAL REAL PROPERTY. STATE CONTRACT NUMBER OF ANY GOVERNMENT CONTRACT.

**SCHEDULE H - CODEBTORS**

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by the debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight-year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR	NAME AND ADDRESS OF CREDITOR
<b>Hakala, Gary W</b> 725 English Lane Winthrop Harbor, IL 60096	
<b>Hakala, Gary W</b> 725 English Lane Winthrop Harbor, IL 60096	<b>Aurora Health Care</b> 3115 Lewis Avenue Zion, IL 60099
<b>Hakala, Gary W</b> 725 English Lane Winthrop Harbor, IL 60096	<b>Illinois Housing Authority</b> 401 N Michigan Av, Ste 700 Chicago, IL 60611
<b>Hakala, Gary W</b> 725 English Lane Winthrop Harbor, IL 60096	<b>Larsen Florist</b> 1342 Glen Flora Waukegan, IL 60085
<b>Hakala, Gary W</b> 725 English Lane Winthrop Harbor, IL 60096	<b>Visa Medical Center East</b> 99 Greenwood Av Waukegan, IL 60087-5136

**Fill in this information to identify your case:**

Debtor 1	<b>Mary</b> First Name	<b>B</b> Middle Name	<b>Corcoran</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF ILLINOIS</b>			
Case number (if known)			

Check if this is:

- An amended filing  
 A supplement showing post-petition chapter 13 income as of the following date:

MM / DD / YYYY

**Official Form B 6I**

**Schedule I: Your Income**

12/13

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Employment**

**1. Fill in your employment information.**

If you have more than one job, attach a separate page with information about additional employers.

Include part-time, seasonal, or self-employed work.

Occupation may include student or homemaker, if it applies.

	<b>Debtor 1</b>	<b>Debtor 2 or non-filing spouse</b>
Employment status	<input type="checkbox"/> Employed <input checked="" type="checkbox"/> Not employed	<input checked="" type="checkbox"/> Employed <input type="checkbox"/> Not employed
Occupation	<b>Unemployed</b>	<b>Truck Driver</b>
Employer's name	<b>TH Ryan Co</b>	
Employer's address	<b>Maywood, IL</b> Number Street	
City	State	Zip Code
How long employed there?	<b>2 years</b>	

**Part 2: Give Details About Monthly Income**

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

	<b>For Debtor 1</b>	<b>For Debtor 2 or non-filing spouse</b>
2. List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.	2. <b>\$0.00</b>	<b>\$5,040.66</b>
3. Estimate and list monthly overtime pay.	3. + <b>\$0.00</b>	<b>\$0.00</b>
4. Calculate gross income. Add line 2 + line 3.	4. <b>\$0.00</b>	<b>\$5,040.66</b>

Debtor 1 MaryBDocument Corcoran Page 21 of 42

Case number (if known) \_\_\_\_\_

First Name Middle Name Last Name

	For Debtor 1	For Debtor 2 or non-filing spouse
<b>Copy line 4 here .....</b>	<b>→ 4.</b>	<b>\$0.00</b>
<b>5. List all payroll deductions:</b>		<b>\$5,040.66</b>
5a. Tax, Medicare, and Social Security deductions	5a.	\$0.00
5b. Mandatory contributions for retirement plans	5b.	\$0.00
5c. Voluntary contributions for retirement plans	5c.	\$0.00
5d. Required repayments of retirement fund loans	5d.	\$0.00
5e. Insurance	5e.	\$0.00
5f. Domestic support obligations	5f.	\$0.00
5g. Union dues	5g.	\$0.00
5h. Other deductions. Specify: _____	5h. +	\$0.00
<b>6. Add the payroll deductions.</b> Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h.	6.	\$0.00
<b>7. Calculate total monthly take-home pay.</b> Subtract line 6 from line 4.	7.	\$0.00
<b>8. List all other income regularly received:</b>		<b>\$1,577.51</b>
8a. Net income from rental property and from operating a business, profession, or farm	8a.	\$0.00
Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.		<b>\$0.00</b>
8b. Interest and dividends	8b.	\$0.00
8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive	8c.	\$0.00
Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.		<b>\$0.00</b>
8d. Unemployment compensation	8d.	\$0.00
8e. Social Security	8e.	\$0.00
8f. Other government assistance that you regularly receive		<b>\$0.00</b>
Include cash assistance and the value (if known) or any non- cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies.		<b>\$0.00</b>
Specify: _____	8f. +	\$0.00
8g. Pension or retirement income	8g.	\$0.00
8h. Other monthly income. Specify: _____	8h. +	\$0.00
<b>9. Add all other income.</b> Add lines 8a + 8b + 8c + 8d + 8e + 8f + 8g + 8h.	9.	\$0.00
<b>10. Calculate monthly income.</b> Add line 7 + line 9. Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	\$0.00
	+ \$3,463.15	= <b>\$3,463.15</b>
<b>11. State all other regular contributions to the expenses that you list in Schedule J.</b> Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives.		
Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J.		
Specify: _____	11. +	\$0.00
<b>12. Add the amount in the last column of line 10 to the amount in line 11.</b> The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies.		12. <b>\$3,463.15</b>
<b>Combined monthly income</b>		
<b>13. Do you expect an increase or decrease within the year after you file this form?</b>		
<input checked="" type="checkbox"/> No. <b>None.</b>		
<input type="checkbox"/> Yes. Explain:		

**Fill in this information to identify your case:**

Debtor 1	<b>Mary</b> First Name	<b>B</b> Middle Name	<b>Corcoran</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF ILLINOIS</b>			
Case number (if known)			

Check if this is:

- An amended filing  
 A supplement showing post-petition chapter 13 expenses as of the following date:  
 \_\_\_\_\_  
 A separate filing for Debtor 2 because Debtor 2 maintains a separate household

**Official Form B 6J**

**Schedule J: Your Expenses**

12/13

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach another sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

**Part 1: Describe Your Household**

1. Is this a joint case?

- No. Go to line 2.  
 Yes. Does Debtor 2 live in a separate household?  
 No  
 Yes. Debtor 2 must file a separate Schedule J.

2. Do you have dependents?

Do not list Debtor 1 and Debtor 2.

No

Yes. Fill out this information for each dependent.....

**Dependent's relationship to Debtor 1 or Debtor 2**

**DEPENDENT**

**Dependent's age**

**37**

**Does dependent live with you?**

- No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes  
 No  
 Yes

Do not state the dependents' names.

**DEPENDENT**

**10**

3. Do your expenses include expenses of people other than yourself and your dependents?

- No  
 Yes

**Part 2: Estimate Your Ongoing Monthly Expenses**

Estimate your expenses as of your bankruptcy filing date unless you are using this form as a supplement in a Chapter 13 case to report expenses as of a date after the bankruptcy is filed. If this is a supplemental Schedule J, check the box at the top of the form and fill in the applicable date.

Include expenses paid for with non-cash government assistance if you know the value of such assistance and have included it on Schedule I: Your Income (Official Form B 6I.)

4. The rental or home ownership expenses for your residence.

Include first mortgage payments and any rent for the ground or lot.

If not included in line 4:

4a. Real estate taxes

**Your expenses**

4. **\$1,809.00**

4b. Property, homeowner's, or renter's insurance

4a. \_\_\_\_\_

**\$127.00**

4c. Home maintenance, repair, and upkeep expenses

4b. \_\_\_\_\_

4d. Homeowner's association or condominium dues

4c. \_\_\_\_\_

4d. \_\_\_\_\_

Debtor 1 Mary B Corcoran Document Page 23 of 42 Case number (if known) \_\_\_\_\_

		<u>Your expenses</u>
5.	<b>Additional mortgage payments for your residence</b> , such as home equity loans	5. _____
6.	<b>Utilities:</b>	
6a.	Electricity, heat, natural gas	6a. _____ <b>\$300.00</b>
6b.	Water, sewer, garbage collection	6b. _____ <b>\$45.00</b>
6c.	Telephone, cell phone, Internet, satellite, and cable services	6c. _____ <b>\$200.00</b>
6d.	Other. Specify: _____	6d. _____
7.	<b>Food and housekeeping supplies</b>	7. _____ <b>\$400.00</b>
8.	<b>Childcare and children's education costs</b>	8. _____
9.	<b>Clothing, laundry, and dry cleaning</b>	9. _____
10.	<b>Personal care products and services</b>	10. _____ <b>\$25.00</b>
11.	<b>Medical and dental expenses</b>	11. _____ <b>\$100.00</b>
12.	<b>Transportation.</b> Include gas, maintenance, bus or train fare. Do not include car payments.	12. _____ <b>\$600.00</b>
13.	<b>Entertainment, clubs, recreation, newspapers, magazines, and books</b>	13. _____ <b>\$25.00</b>
14.	<b>Charitable contributions and religious donations</b>	14. _____ <b>\$25.00</b>
15.	<b>Insurance.</b> Do not include insurance deducted from your pay or included in lines 4 or 20.	
15a.	Life insurance	15a. _____ <b>\$70.00</b>
15b.	Health insurance	15b. _____
15c.	Vehicle insurance	15c. _____ <b>\$127.00</b>
15d.	Other insurance. Specify: _____	15d. _____
16.	<b>Taxes.</b> Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: _____	16. _____
17.	<b>Installment or lease payments:</b>	
17a.	Car payments for Vehicle 1	17a. _____
17b.	Car payments for Vehicle 2	17b. _____
17c.	Other. Specify: <u>Auto Repairs</u>	17c. _____ <b>\$150.00</b>
17d.	Other. Specify: <u>Personal Grooming</u>	17d. _____ <b>\$100.00</b>
18.	<b>Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form B 6I).</b>	18. _____
19.	<b>Other payments you make to support others who do not live with you.</b> Specify: _____	19. _____
20.	<b>Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income.</b>	
20a.	Mortgages on other property	20a. _____
20b.	Real estate taxes	20b. _____
20c.	Property, homeowner's, or renter's insurance	20c. _____
20d.	Maintenance, repair, and upkeep expenses	20d. _____
20e.	Homeowner's association or condominium dues	20e. _____

Debtor 1 Mary B Corcoran Document Page 24 of 42 Case number (if known) \_\_\_\_\_

21. Other. Specify: _____	21. + _____
22. Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses.	22. _____ \$4,103.00
23. Calculate your monthly net income.	
23a. Copy line 12 (your combined monthly income) from Schedule I.	23a. _____ \$3,463.15
23b. Copy your monthly expenses from line 22 above.	23b. - _____ \$4,103.00
23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income.	23c. _____ (\$639.85)

**24. Do you expect an increase or decrease in your expenses within the year after you file this form?**

For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of a modification to the terms of your mortgage?

No.

Yes. Explain here:  
**None.**

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

In re **Mary B Corcoran**

Case No.

Chapter **7**

**SUMMARY OF SCHEDULES**

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors also must complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

NAME OF SCHEDULE	ATTACHED (YES/NO)	NO. OF SHEETS	ASSETS	LIABILITIES	OTHER
A - Real Property	Yes	1	\$175,000.00		
B - Personal Property	Yes	4	\$6,420.99		
C - Property Claimed as Exempt	Yes	1			
D - Creditors Holding Secured Claims	Yes	1		\$164,620.00	
E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E)	Yes	1		\$0.00	
F - Creditors Holding Unsecured Nonpriority Claims	Yes	4		\$62,967.00	
G - Executory Contracts and Unexpired Leases	Yes	1			
H - Codebtors	Yes	1			
I - Current Income of Individual Debtor(s)	Yes	2			\$3,463.15
J - Current Expenditures of Individual Debtor(s)	Yes	3			\$4,103.00
TOTAL		19	\$181,420.99	\$227,587.00	

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

In re **Mary B Corcoran**

Case No.

Chapter **7**

**STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)**

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C. § 101(8)), filing a case under chapter 7, 11, or 13, you must report all information requested below.

Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

**This information is for statistical purposes only under 28 U.S.C. § 159.**

**Summarize the following types of liabilities, as reported in the Schedules, and total them.**

Type of Liability	Amount
Domestic Support Obligations (from Schedule E)	\$0.00
Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E)	\$0.00
Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed)	\$0.00
Student Loan Obligations (from Schedule F)	\$0.00
Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E	\$0.00
Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F)	\$0.00
<b>TOTAL</b>	<b>\$0.00</b>

**State the following:**

Average Income (from Schedule I, Line 12)	\$3,463.15
Average Expenses (from Schedule J, Line 22)	\$4,103.00
Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14)	\$5,040.66

**State the following:**

1. Total from Schedule D, "UNSECURED PORTION, IF ANY" column		\$0.00
2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column.	\$0.00	
3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column		\$0.00
4. Total from Schedule F		\$62,967.00
5. Total of non-priority unsecured debt (sum of 1, 3, and 4)		\$62,967.00

**DECLARATION CONCERNING DEBTOR'S SCHEDULES**  
**DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR**

I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of \_\_\_\_\_ sheets, and that they are true and correct to the best of my knowledge, information, and belief.

Date 1/12/2015

Signature /s/ Mary B Corcoran  
Mary B Corcoran

Date \_\_\_\_\_

Signature \_\_\_\_\_

[If joint case, both spouses must sign.]

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

In re: **Mary B Corcoran**

Case No. \_\_\_\_\_

(if known)

## STATEMENT OF FINANCIAL AFFAIRS

### **1. Income from employment or operation of business**

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the TWO YEARS immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT	SOURCE
\$0.00	2014 \$0
	2013 \$36,000 from annuity (annuity exhausted in 11/13 and 12/13)
	2012 \$36,000 income from annuity

### **2. Income other than from employment or operation of business**

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the TWO YEARS immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### **3. Payments to creditors**

*Complete a. or b., as appropriate, and c.*

None

a. Individual or joint debtor(s) with primarily consumer debts: List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within 90 DAYS immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within 90 DAYS immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225\*. If the debtor is an individual, indicate with an asterisk (\*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

\* Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

None

c. All debtors: List all payments made within ONE YEAR immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

### **4. Suits and administrative proceedings, executions, garnishments and attachments**

None

a. List all suits and administrative proceedings to which the debtor is or was a party within ONE YEAR immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT AND CASE NUMBER	NATURE OF PROCEEDING	COURT OR AGENCY AND LOCATION	STATUS OR DISPOSITION
North Shore Savings and Trust v. Mary Corcoran-hakala.	Foreclosure	Circuit Court of the 19th Judicial Circuit	pending

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

In re: **Mary B Corcoran**

Case No. \_\_\_\_\_

(if known)

**STATEMENT OF FINANCIAL AFFAIRS***Continuation Sheet No. 1*

- None  b. Describe all property that has been attached, garnished or seized under any legal or equitable process within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**5. Repossessions, foreclosures and returns**

- None  List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**6. Assignments and receiverships**

- None  a. Describe any assignment of property for the benefit of creditors made within 120 DAYS immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

- None  b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**7. Gifts**

- None  List all gifts or charitable contributions made within ONE YEAR immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**8. Losses**

- None  List all losses from fire, theft, other casualty or gambling within ONE YEAR immediately preceding the commencement of this case OR SINCE THE COMMENCEMENT OF THIS CASE. (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**9. Payments related to debt counseling or bankruptcy**

- None  List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of a petition in bankruptcy within ONE YEAR immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE	DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR	AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY
HAROLD M. SAALFELD 25 NORTH COUNTY STREET SUITE 2R WAUKEGAN, IL 60085-4342	2014-2015	\$1,424.00

**10. Other transfers**

- None  a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within TWO YEARS immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

In re: **Mary B Corcoran**

Case No. \_\_\_\_\_

(if known)

**STATEMENT OF FINANCIAL AFFAIRS***Continuation Sheet No. 2*

None b. List all property transferred by the debtor within TEN YEARS immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

**11. Closed financial accounts**

None List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within ONE YEAR immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**12. Safe deposit boxes**

None List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within ONE YEAR immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**13. Setoffs**

None List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within 90 DAYS preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

**14. Property held for another person**

None List all property owned by another person that the debtor holds or controls.

**15. Prior address of debtor**

None If the debtor has moved within THREE YEARS immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

**16. Spouses and Former Spouses**

None If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within EIGHT YEARS immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

In re: **Mary B Corcoran**

Case No. \_\_\_\_\_

(if known)

**STATEMENT OF FINANCIAL AFFAIRS***Continuation Sheet No. 3***17. Environmental Information**

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law.

None a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or  
 potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

None b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous Material.  
 Indicate the governmental unit to which the notice was sent and the date of the notice.

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the docket number.

**18. Nature, location and name of business**

None a. If the debtor is an individual, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within SIX YEARS immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within SIX YEARS immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within SIX YEARS immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer-identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within SIX YEARS immediately preceding the commencement of this case.

None b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

In re: **Mary B Corcoran**

Case No. \_\_\_\_\_

(if known)

**STATEMENT OF FINANCIAL AFFAIRS***Continuation Sheet No. 4*

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within SIX YEARS immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement ONLY if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

**19. Books, records and financial statements**

- None  a. List all bookkeepers and accountants who within TWO YEARS immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.
- None  b. List all firms or individuals who within TWO YEARS immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.
- None  c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.
- None  d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within TWO YEARS immediately preceding the commencement of this case.

**20. Inventories**

- None  a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.
- None  b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

**21. Current Partners, Officers, Directors and Shareholders**

- None  a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.
- None  b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

**22. Former partners, officers, directors and shareholders**

- None  a. If the debtor is a partnership, list each member who withdrew from the partnership within ONE YEAR immediately preceding the commencement of this case.
- None  b. If the debtor is a corporation, list all officers or directors whose relationship with the corporation terminated within ONE YEAR immediately preceding the commencement of this case.

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

In re: **Mary B Corcoran**Case No. \_\_\_\_\_  
(if known)**STATEMENT OF FINANCIAL AFFAIRS***Continuation Sheet No. 5***23. Withdrawals from a partnership or distributions by a corporation**

- None  If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during ONE YEAR immediately preceding the commencement of this case.

**24. Tax Consolidation Group**

- None  If the debtor is a corporation, list the name and federal taxpayer-identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within SIX YEARS immediately preceding the commencement of the case.

**25. Pension Funds**

- None  If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within SIX YEARS immediately preceding the commencement of the case.

*[If completed by an individual or individual and spouse]*

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date 1/12/2015Signature /s/ Mary B Corcoran  
of Debtor Mary B Corcoran

Date \_\_\_\_\_

Signature \_\_\_\_\_  
of Joint Debtor  
(if any)

*Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both.  
18 U.S.C. §§ 152 and 3571*

**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **Mary B Corcoran**

CASE NO

CHAPTER **7**

**CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION**

PART A -- Debts secured by property of the estate. (Part A must be fully completed for EACH debt which is secured by property of the estate. Attach additional pages if necessary.)

Property No. <b>1</b>		
<b>Creditor's Name:</b> North Shore Trust & Sa 700 S Lewis Ave Waukegan, IL 60085 xxxxxx7618	<b>Describe Property Securing Debt:</b> Single Family Home	
<p>Property will be (check one):</p> <p><input type="checkbox"/> Surrendered      <input checked="" type="checkbox"/> Retained</p> <p>If retaining the property, I intend to (check at least one):</p> <p><input type="checkbox"/> Redeem the property  <input checked="" type="checkbox"/> Reaffirm the debt  <input type="checkbox"/> Other. Explain (for example, avoid lien using 11 U.S.C. § 522(f)):</p>		
<p>Property is (check one):</p> <p><input type="checkbox"/> Claimed as exempt      <input type="checkbox"/> Not claimed as exempt</p>		

PART B -- Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

Property No. <b>1</b>		
<b>Lessor's Name:</b> None	<b>Describe Leased Property:</b>	Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2):
		YES <input type="checkbox"/> NO <input type="checkbox"/>

**I declare under penalty of perjury that the above indicates my intention as to any property of my estate securing a debt and/or personal property subject to an unexpired lease.**

Date 1/12/2015Signature /s/ Mary B Corcoran  
Mary B Corcoran

Date \_\_\_\_\_

Signature \_\_\_\_\_



**UNITED STATES BANKRUPTCY COURT  
NORTHERN DISTRICT OF ILLINOIS  
EASTERN DIVISION (CHICAGO)**

IN RE: **Mary B Corcoran**

CASE NO

CHAPTER **7**

**VERIFICATION OF CREDITOR MATRIX**

The above named Debtor hereby verifies that the attached list of creditors is true and correct to the best of his/her knowledge.

Date 1/12/2015

Signature *Is/ Mary B Corcoran*  
*Mary B Corcoran*

Date \_\_\_\_\_

Signature \_\_\_\_\_

American Express  
PO Box 3001  
16 General Warren Blvd  
Malvern, PA 19355

Aurora Health Care  
3115 Lewis Avenue  
Zion, IL 60099

Bank Of America  
Attention: Recovery Department  
4161 Piedmont Pkwy.  
Greensboro, NC 27410

Certified Services Inc  
1733 Washington St Ste 2  
Waukegan, IL 60085

Choice Recovery  
1550 Old Henderson Rd St  
Columbus, OH 43220

Comenity Bank/fashbug

Comenity Bank/lnbryant  
4590 E Broad St  
Columbus, OH 43213

Comenity Bank/Maurices  
Attention: Bankruptcy  
PO Box 182686  
Columbus, OH 43218

Comenity/Avenue  
Attn:Bankruptcy  
PO Box 182125  
Columbus, OH 43218

Credit Cntrl  
5757 Phantom Dr.  
Hazelwood, MO 63042

Dsnb Macys  
9111 Duke Blvd  
Mason, OH 45040

Gary W Hakala  
725 English Lane  
Winthrop Harbor, IL 60096

Harris  
Harris & Harris, Ltd.  
111 W Jackson Blvd 400  
Chicago, IL 60604

Illinois Housing Authority  
401 N Michigan Av, Ste 700  
Chicago, IL 60611

Keynote Consulting  
220 West Campus Drive  
Suite 102  
Arlington Heights, IL 60004

Kohls/capone  
N56 W 17000 Ridgewood Dr  
Menomonee Falls, WI 53051

Larsen Florist  
1342 Glen Flora  
Waukegan, IL 60085

Midland Funding  
8875 Aero Dr Ste 200  
San Diego, CA 92123

North Shore Trust & Sa  
700 S Lewis Ave  
Waukegan, IL 60085

Thaddeus Bond, Esq.  
200 North Martin Luther King Jr Driveq.  
Waukegan, IL 60085

Visa Medical Center East  
99 Greenwood Av  
Waukegan, IL 60087-5136

Wf Fin Bank  
Attention: Bankruptcy  
PO Box 10438  
Des Moines, IA 50306

**Fill in this information to identify your case:**

Debtor 1	<b>Mary</b> First Name	<b>B</b> Middle Name	<b>Corcoran</b> Last Name
Debtor 2 (Spouse, if filing)	First Name	Middle Name	Last Name
United States Bankruptcy Court for the: <b>NORTHERN DISTRICT OF ILLINOIS</b>			
Case number (if known)			

**Check one box only as directed in this form and in Form 22A-1Supp:**

1. There is no presumption of abuse.
2. The calculation to determine if a presumption of abuse applies will be made under Chapter 7 Means Test Calculation (Official Form 22A-2).
3. The Means Test does not apply now because of qualified military service but it could apply later.
- Check if this is an amended filing

**Official Form 22A-1**

**Chapter 7 Statement of Your Current Monthly Income**

12/14

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for being accurate. If more space is needed, attach a separate sheet to this form. Include the line number to which the additional information applies. On top of any additional pages, write your name and case number (if known). If you believe that you are exempted from a presumption of abuse because you do not have primarily consumer debts or because of qualifying military service, complete and file the Statement of Exemption from Presumption of Abuse Under § 707(b)(2) (Official Form 22A-1Supp) with this form.

**Part 1: Calculate Your Current Monthly Income**

1. What is your marital and filing status? Check one only.

- Not married. Fill out Column A, lines 2-11.
- Married and your spouse is filing with you. Fill out both Columns A and B, lines 2-11.
- Married and your spouse is NOT filing with you. You and your spouse are:
  - Living in the same household and are not legally separated. Fill out both Columns A and B, lines 2-11.
  - Living separately or are legally separated. Fill out Column A, lines 2-11; do not fill out Column B. By checking this box, you declare under penalty of perjury that you and your spouse are legally separated under nonbankruptcy law that applies or that you and your spouse are living apart for reasons that do not include evading the Means Test requirements. 11 U.S.C. § 707(b)(7)(B).

**Fill in the average monthly income that you received from all sources, derived during the 6 full months before you file this bankruptcy case.** 11 U.S.C. § 101(10A). For example, if you are filing on September 15, the 6-month period would be March 1 through August 31. If the amount of your monthly income varied during the 6 months, add the income for all 6 months and divide the total by 6. Fill in the result. Do not include any income amount more than once. For example, if both spouses own the same rental property, put the income from that property in one column only. If you have nothing to report for any line, write \$0 in the space.

	<b>Column A</b> <b>Debtor 1</b>	<b>Column B</b> <b>Debtor 2 or non-filing spouse</b>
2. Your gross wages, salary, tips, bonuses, overtime, and commissions (before all payroll deductions).	\$0.00	\$5,040.66
3. Alimony and maintenance payments. Do not include payments from a spouse if Column B is filled in.	\$0.00	\$0.00
4. All amounts from any source which are regularly paid for household expenses of you or your dependents, including child support. Include regular contributions from an unmarried partner, members of your household, your dependents, parents, and roommates. Include regular contributions from a spouse only if Column B is not filled in. Do not include payments you listed on line 3.	\$0.00	\$0.00

Debtor 1

MaryBDocument Corcoran

Page 41 of 42

Case number (if known) \_\_\_\_\_

Column A  
Debtor 1Column B  
Debtor 2 or  
non-filing spouse

## 5. Net income from operating a business, profession, or farm

Gross receipts (before all deductions)	<u><b>\$0.00</b></u>		
Ordinary and necessary operating expenses	- <u><b>\$0.00</b></u>		
Net monthly income from a business, profession, or farm	<u><b>\$0.00</b></u>	<b>Copy here →</b>	<u><b>\$0.00</b></u>
			<u><b>\$0.00</b></u>

## 6. Net income from rental and other real property

Gross receipts (before all deductions)	<u><b>\$0.00</b></u>		
Ordinary and necessary operating expenses	- <u><b>\$0.00</b></u>		
Net monthly income from rental or other real property	<u><b>\$0.00</b></u>	<b>Copy here →</b>	<u><b>\$0.00</b></u>
			<u><b>\$0.00</b></u>

## 7. Interest, dividends, and royalties

**\$0.00**

## 8. Unemployment compensation

**\$0.00**

Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: ..... ↓

For you.....	<u><b>\$0.00</b></u>
For your spouse.....	<u><b>\$0.00</b></u>

## 9. Pension or retirement income. Do not include any amount received that was a benefit under the Social Security Act.

**\$0.00****\$0.00**

## 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total on line 10c.

10a. \_\_\_\_\_

10b. \_\_\_\_\_

10c. Total amounts from separate pages, if any.

+ \_\_\_\_\_ + \_\_\_\_\_

<u><b>\$0.00</b></u>	+	<u><b>\$5,040.66</b></u>	= <u><b>\$5,040.66</b></u>
			Total current monthly income

## 11. Calculate your total current monthly income.

Add lines 2 through 10 for each column.

Then add the total for Column A to the total for Column B.

**Part 2: Determine Whether the Means Test Applies to You**

## 12. Calculate your current monthly income for the year. Follow these steps:

12a. Copy your total current monthly income from line 11.....

Copy line 11 here → 12a.

**\$5,040.66**

Multiply by 12 (the number of months in a year).

X 12

12b. The result is your annual income for this part of the form.

12b. **\$60,487.92**

Debtor 1 Mary B Corcoran Document Page 42 of 42 Case number (if known) \_\_\_\_\_

**13. Calculate the median family income that applies to you. Follow these steps:**

Fill in the state in which you live.

**Illinois**

Fill in the number of people in your household.

**2**

Fill in the median family income for your state and size of household..... 13.

**\$61,443.00**

To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office.

**14. How do the lines compare?**

14a.  Line 12b is less than or equal to line 13. On the top of page 1, check box 1, *There is no presumption of abuse*. Go to Part 3.

14b.  Line 12b is more than line 13. On the top of page 1, check box 2, *The presumption of abuse is determined by Form 22A-2*. Go to Part 3 and fill out Form 22A-2.

**Part 3: Sign Below**

By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct.

**X** /s/ Mary B Corcoran  
Mary B Corcoran

**X** \_\_\_\_\_  
Signature of Debtor 2

Date 1/12/2015  
MM / DD / YYYY

Date \_\_\_\_\_  
MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 22A-2.

If you checked line 14b, fill out Form 22A-2 and file it with this form.